

KSC-12139-1 (NASA Case No.)

## D claration, Pow r of Attorn y and P tition - Original Application

As a below named inventor, I hereby declare that: My residence, mailing address and citizenship, are stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed						
below) of the subject matter which is claimed and		•	• •	, Ç.	TEC	
Thermodynamic Pressure/Temperat	ure Transd	lucer He	ealth Check	<u></u> .	善品品	
Incimou/mamio 11 assuro, temperus	410 1141114				620	
		1521	una filad an (Data)	11/09/2001	- <del>2</del> 8	
20 /20 / 20 2	ched hereto,	$\boxtimes$	was filed on (Date)	11/09/2001		
as Application Serial No. $09/994,990$		and wa	as amended (Date)		20 2002	
I have reviewed and understand the contents of the referred to above.	ne above identi	fied specif	ication, including the clai	ms, as amended b	$\sim$	
I acknowledge the duty to disclose to the Patent a defined in 37 CFR §1.56.	ınd Trademark	Office all i	information which is know	vn to me to be mate	erial to patentability as	
I hereby claim the benefit under 35 U.S.C. §120 of the claims of this application is not disclosed in the §112, I acknowledge the duty to disclose to the Pedefined in 37 CFR §1.56 which became available date of this application:	e prior United atent and Trad	States app emark Offi	olication in the manner pro ice all information known	ovided by the first p to me to be materia	paragraph of 35 U.S.C.	
(Serial No.) (Filing Date)	the status of w	hich is	patented,	pending,	abandoned	
t hereby claim priority benefits under Title 35, Uni	tad States Cod	la 6110/a\	of any United States Bro		9	
Thereby dailin priority benefits under Title 55, On	ted States Cou	ie 31 13(e)	or any oraced States Fro	visional Application	is listed below.	
60/247,848 , 11/09/2000	, the status of	f which is p	ending.			
(Provisional Serial No.) (Filing Date)						
POWER OF ATTORNEY: I hereby appoint the for and Trademark Office connected therewith:	ollowing attorne	y(s) to pro	secute this application ar	nd to transact all bu	siness in the Patenbo	
and Trademark Office connected therewith:					ORIGINALLY FILED	
Registered practitioner(s) at Customer I	Number		, OR	`	JHIGHWILL:	
Registered practitioner(s) listed below						
Randall M. Heald	28,56	! <b>1</b>	Gary G. Borda		25.455	
(Name)	(Reg. No	0.)	(Name)	)	35,455 (Reg. No.)	
Alan J. Kennedy	28,62	5	Harry Lupuloff		31,117	
(Name)	(Reg. No		(Name)	)	(Reg. No.)	
Sue H. Palk	36,42	2	John G. Mannix		27,254	
(Name)	(Reg. No	D.)	(Name	)	(Reg. No.)	
ADDRESS ALL CORRESPONDENCE TO:	,		DIRECT TELEPHONE	CALLS TO:		
Customer Number, OR			Telephone (Complete n		from USPTO):	
Correspondence Address listed below:			321-867-7214		110/11 00/11 0/.	
Name: Randall M. Heald, Patent (	Counsel					
Address: Mail Code: CC-A/NASA	ovunaci	-			· · · · · · · · · · · · · · · · · · ·	
John F. Kennedy Space Cer	nter	-				
Kennedy Space Center, FL	32899	_				

KSC-12139-1 (NASA Case N .)

	e National Aeronautics and Space Administra in this application and has the irrevocable righ		or license t the and to receive the pat int.
Wherefore, I pray and claims, and I i	that Letters Patent be granted to me for this in nereby subscribe my name to the foregoing sp	nvention or discovery described and claims pecification, claims, power of attorney and	ed in the foregoing specification this petition.
believed to be true punishable by fine	at all statements made herein of my own know; and further that these statements were made or imprisonment, or both, under 18 U.S.C. §1 patent issuing thereon.	e with the knowledge that willful false state	ments and the like so made are
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
OF INVENTOR	Immer	Christopher	D.
RESIDENCE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
AND	Merritt Island	FLORIDA	U.S.A.
MAILING	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
ADDRESS	255 S Tropical Trail, Apt#605	Merritt Island, FL	32952
SIGNATURE	The A Summer		DATE
FULL NAME	LASŢ	FIRST	MIDDLE OR INITIAL
OF INVENTOR	Eckoff aft	Anthony	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
RESIDENCE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
AND	COCOA	FLORIDA	U.S.A.
MAILING	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
ADDRESS	511 Carter St.	Cocoa, FL	32927
SIGNATURE	0		DATE
ath	my Echloff		02/01/02
FULL NAME	LA\$T	FIRST	MIDDLE OR INITIAL
OF INVENTOR	Medelius	Pedro	J.
RESIDENCE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
AND	Merritt Island	FLORIDA	U.S.A.
MAILING	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
ADDRESS	845 Lakewood Circle	Merritt Island	32952
SIGNATURE	_ J 0000ii		2/01/02
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
OF INVENTOR	Deyoe ·	Richard	T.
RESIDENCE AND	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	N.E. Palm Bay	FLORIDA	U.S.A.
ADDRESS	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
	126 Goldcoast Road	N.E. Palm Bay, FL	32907
SIGNATURE	7		DATE / /
	hVINDE -		2/2/2

Further, as a named inventor, I certify that the Government of th United States of America, as represented by the

KSC-12139-1 (NASA Case No.)

Administrator of the	e National Aeronautics and Space Administr in this application and has the irrevocable rig	ration has 💢 an assignment in, o	
Wherefore, I pray tand claims, and I h	that Letters Patent be granted to me for this nereby subscribe my name to the foregoing s	invention or discovery described and claims specification, claims, power of attorney and	ed in the foregoing specification this petition.
believed to be true;	at all statements made herein of my own kno ; and further that these statements were mad or imprisonment, or both, under 18 U.S.C. §	de with the knowledge that willful false state	ments and the like so made are
application or any p	patent issuing thereon.		
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
OF INVENTOR	Starr	Stanley	0
RESIDENCE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
AND	Indialantic	FLORIDA	U.S.A.
MAILING	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
ADDRESS	3069 Rio Bonita St.	Indialantic, FL	32903
SIGNATURE	/ /		DATE
Hay	rly O Halh		2/01/02
	ILAST	IFIRST	MIDDLE OR INITIAL
FULL NAME OF INVENTOR			THE STATE OF THE S
RESIDENCE AND	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
MAILING ADDRESS	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
SIGNATURE			DATE
	LACT	IFIDOX	AUDDI C OD INITIAL
FULL NAME OF INVENTOR	LAST	FIRST	MIDDLE OR INITIAL
RESIDENCE AND	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
MAILING ADDRESS	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
SIGNATURE			DATE
FULL NAME	LAST	FIRST	MIDDLE OR INITIAL
OF INVENTOR			
RESIDENCE AND	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
MAILING ADDRESS	STREET NO. AND NAME	CITY AND STATE (OR COUNTRY)	ZIP CODE
SIGNATURE			DATE